

WEST AFRICA – EBOLA OUTBREAK

FACT SHEET #9, FISCAL YEAR (FY) 2015

NOVEMBER 26, 2014

NUMBERS AT A GLANCE

15,909

Total Number of Suspected and Confirmed Ebola Virus Disease (EVD) Cases in Acutely Affected Countries*

U.N. World Health Organization (WHO) – November 26, 2014

5,674

Total Number of EVD-Related Deaths WHO – November 26, 2014

7,168

Total Number of EVD Cases in Liberia* WHO – November 26, 2014

6,599

Total Number of EVD Cases in Sierra Leone* WHO – November 26, 2014

2,134

Total Number of EVD Cases in Guinea* WHO – November 26, 2014

8

Total Number of EVD Cases in Mali* WHO – November 26, 2014

*Includes laboratory-confirmed, probable, and suspected EVD cases. Numbers are subject to change due to reclassification, retrospective investigation, and availability of laboratory results.

HIGHLIGHTS

- On November 21, U.N. Secretary General (SYG) Ban Ki-moon requested that U.N. Special Representative of the Secretary-General (SRSG) and Head of the U.N. Mission for Ebola Emergency Response (UNMEER) Tony Banbury establish a U.N. support mission in Mali.
- On November 21, USAID/OFDA-procured personal protective equipment (PPE) arrived in Monrovia, Liberia, with a second shipment in-transit and expected to arrive on November 28. Together, the two shipments contain approximately 107,000 PPE sets.
- In recent weeks, USAID/OFDA has committed more than \$85 million to the U.N. World Food Program (WFP) and the U.N. Children's Fund (UNICEF) for the Liberia EVD outbreak response.

USG HUMANITARIAN ASSISTANCE TO EVD OUTBREAK RESPONSE TO DATE IN FY 2014 & FY 2015

USAID/OFDA ¹	\$315,830,775
USAID/FFP ²	\$34,769,529
USAID/GH ³	\$17,676,000
USAID/Liberia	\$5,000,000
USAID/Guinea	\$3,482,000
DoD ⁴	\$283,300,000
CDC ⁵	\$43,492,000 ⁶

\$703,550,304

USG ASSISTANCE TO THE WEST AFRICA EVD OUTBREAK RESPONSE⁷

KEY DEVELOPMENTS

- On November 22, USG Disaster Assistance Response Team (DART) members attended the official opening of the 88-bed Kakata EVD treatment unit (ETU) in Margibi County, Liberia. The event included the handover of the facility between USAID/OFDA partners Save the Children (SC), which built the ETU, and International Medical Corps (IMC), which will manage the ETU. The opening of the Kakata ETU brings the total number of operational ETUs in Liberia to nine.
- Between November 10 and 16, health actors confirmed more than 530 new EVD cases in Sierra Leone, including nearly 170 cases—or 32 percent of all new cases—in the capital city of Freetown, according to WHO. Transmission remains persistent and elevated across Sierra Leone, except for southeastern areas of the country. Robust response efforts have decreased the number of new EVD cases in Eastern Province, with Kailahun and Kenema districts—previously the epicenters of the EVD outbreak in Sierra Leone.
- During a November 21 press conference, SYG Ban Ki-Moon appealed to the international community to remain engaged in the response to the EVD outbreak in West Africa. SYG Ban noted that WHO authorities hope to contain the epidemic by mid-2015 with continued assistance from the international community.

¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² USAID's Office of Food for Peace (USAID/FFP)

³ USAID's Bureau for Global Health (USAID/GH)

⁴ U.S. Department of Defense (DoD)

⁵ U.S. Centers for Disease Control and Prevention (CDC)

⁶ CDC funding as of November 26; total includes estimated salaries and benefits and funding from all sources. USAID/OFDA funding to CDC—\$5 million—is not included in this total.

⁷ Total funding figures reflect committed USG humanitarian and development funding to date. This number represents a subset of the total USG effort.

CURRENT SITUATION

Guinea

- Following robust efforts from the DART and relief agencies, Guinea has received a number of vehicles to meet logistical needs associated with the Ebola response. In addition to the nearly 40 ambulances and other in-kind vehicle contributions that UNICEF is providing to Guinea, CDC and the CDC Foundation are working to deliver 100 vehicles in the coming weeks for consignment to the Government of Guinea (GoG) for patient and specimen transport.
- On November 20, DART staff addressed community members in N'zérékoré Prefecture on recognizing signs and symptoms of EVD, preventing infection, and the importance of involvement by local leaders in public health messaging.
- While in N'zérékoré, DART members also conducted a presentation on infection prevention and control (IPC) and social mobilization for medical personnel affiliated with the USG-funded *Centre Medical Esperance de Nzau*. The DART discussed EVD modes of transmission, IPC measures, and messaging that hospital staff can relay to their communities and advised hospital staff on setting up triage and isolation units.
- On November 25, Médecins Sans Frontières (MSF) reported that persistent community opposition to EVD response activities in the capital city of Conakry's Matoto commune has forced the organization to further delay the establishment of an ETU. For six weeks, MSF has been working with the GoG, CDC, and other response actors to help relocate the Conakry-based ETU from the Donka Hospital complex to Matoto. However, nearby residents have expressed strong resistance to the effort.

Liberia

- While EVD transmission rates in some areas of Liberia continue to follow a downward trend, the Government of Liberia (GoL) reports that approximately 50 percent of current EVD cases remain concentrated in the capital city of Monrovia and surrounding areas of Montserrado County. According to the GoL, contact tracers had identified more than 5,500 individuals in the county for follow-up assessments as of November 19, including more than 3,000 people in Monrovia. In response, the GoL has underscored the continued need for robust response activities—including contact tracing and case investigation—in Montserrado. With technical support from the DART, GoL authorities are developing an operational plan to strengthen county-level coordination and expand key activities.
- CDC met with USAID/Liberia and UNICEF on November 20 to discuss the development of a protocol to assist the Ministry of Education with the safe re-opening of Liberian schools, which have been closed due to the EVD outbreak since July. USG staff and UNICEF plan to conduct an assessment in the coming weeks to determine the capacity of schools to re-open, and CDC plans to provide infection control guidance to support re-openings when they occur.
- The 30-bed CCC in Dolo town, Margibi County, has received a total of five patients since opening on November 14. Of this caseload, the facility—operated by Save the Children (SC)—has released or referred four patients to other health facilities; one suspected case remained in isolation while awaiting EVD test results as of November 22. In the coming weeks, SC plans to increase social mobilization efforts to improve community awareness of the CCC and coordinate with the Kakata ETU to ensure smooth patient transport and management of referred cases. The opening of the Dolo town CCC has allowed the nearby health clinic to resume non-EVD services.
- On November 21, DART members and Joint Force Command (JFC) Commander Major General Gary Volesky visited the Buchanan ETU in Grand Bassa County to observe the handover of the DoD-constructed site to USAID/OFDA partner International Organization for Migration (IOM). IOM plans to open the Buchanan ETU in the coming weeks with 10 beds and gradually scale up the ETU to as many as 100 beds, depending on need. IOM is liaising with the county health team to integrate the ETU within the county health care structure, utilize local EVD response hotlines, and work with case investigation teams to transport suspected cases to the ETU.
- On November 19, GoL Incident Management System officials approved the Rapid Isolation and Treatment of Ebola (RITE) strategy developed by CDC, the Liberian Ministry of Health (MoH), WHO, and UNICEF. The RITE strategy, designed to be coordinated and implemented by the MoH, county health teams, and implementing partners, aims to reduce EVD transmission through the rapid isolation of potential EVD cases in communities where there is suspicion of active transmission.
- In November, USAID/OFDA provided more than \$38 million in new funding to UNICEF to support the provision of medicines and medical supplies to 20 ETUs and 65 CCCs in Liberia over the next nine months.
- Personal protective equipment (PPE) procured by USAID/OFDA arrived in Monrovia on November 21, with a second shipment in-transit and expected to arrive on November 28. Together, the two shipments contain approximately 107,000 PPE sets—including suits, gloves, goggles, hoods, masks, and other equipment—critical to ensuring the safety of health

care workers (HCWs). The USG DART is working with WHO and the GoL Ministry of Health and Social Welfare to ensure the kits reach health care facilities throughout Liberia.

Mali

- SRSB Banbury and WHO Assistant Director-General Bruce Aylward visited Mali during the week of November 17, where they met with Malian President Ibrahim Boubacar Keita, the minister of health and sanitation, and the national EVD response coordinator and offered UNMEER's support in containing the EVD outbreak. On November 21, SYG Ban requested that SRSB Banbury establish a U.N. support mission in Mali.
- MSF is currently treating newly confirmed EVD cases in its 15-bed EVD treatment center in Mali's capital city, Bamako, where MSF recently reported a lack of willing HCWs to staff the facility. To address the staffing issue, the DART is working with the international humanitarian community, the U.S. Embassy in Bamako, and the GoM to establish procedures for incentive payments for EVD HCWs.
- On November 24, the U.N. Development Program (UNDP) launched a project to boost access to sanitation and health services in and around the border town of Kourémalé, where thousands of people travel from Guinea into Mali each day. Teams of local engineers and community workers are renovating one health post, two bus stations, and a market, equipping them with improved latrines and tap basins, as well as buckets, chlorine, and soap. The teams are also conducting EVD outreach activities among people crossing the border to educate travelers on how to prevent the spread of EVD.
- On November 23, the DART met with USAID/OFDA partner IOM to discuss tracking of cross-border travelers, contact tracing, database management, social mobilization, and transit center operations in Mali. In the coming weeks, IOM plans to conduct EVD-related community outreach activities in areas of Mali that have large migrant populations from EVD-affected countries.

Sierra Leone

- According to CDC staff, the national EVD hotline received on November 20 approximately 1,100 case alerts—an unusually high number—for Western Area, which encompasses Freetown Rural and Freetown Urban. Surveillance teams investigated approximately 97 percent of alerts and identified 24 that met the case definition for EVD. CDC staff report that an unspecified number of those meeting the case definition were not immediately moved from the community due to a shortage of bed capacity in area holding centers. CDC notes that more than 3,000 contacts are being monitored in Western Area.
- UNMEER is working to deploy staff to support nine planned District Ebola Response Centers (DERCS), established by the Government of Sierra Leone (GoSL) with Government of the U.K. assistance. The DERCS—expected to be fully operational by the end of December—will provide a coordination mechanism and forum to address response challenges at the district level, and will channel information to the National Ebola Response Center. As of November 25, UNMEER had deployed staff to Port Loko and Western Area and had identified staff for the seven remaining DERCS.
- The Case Management Pillar—the coordinating body for case management in the EVD response, comprising the GoSL and partners—has developed a dashboard mapping tool for identification and follow-up of safety concerns in EVD facilities. The tool will assist partners to ensure that appropriate IPC measures are implemented to reduce the risk of EVD transmission to patients and staff in facilities.

PROTECTION

- According to the UNICEF-led Family Tracing and Reunification (FTR) network, more than 3,400 children have been directly affected by EVD, including at least 89 children who have lost one parent and more than 795 who have lost both parents to EVD. In response to the increasing number of children affected by EVD, a USAID/OFDA protection advisor participated in a regional child protection workshop on November 24—hosted by the GoSL Ministry of Social Welfare and UNICEF in Freetown—focused on critical issues affecting children and strategies for providing safe and effective child protection interventions in Guinea, Liberia, and Sierra Leone. Key issues discussed during the workshop included child protection case management, surveillance of asymptomatic children who have had contact with EVD cases, and involvement of EVD survivors in psycho-social support services.
- The Case Management Pillar in Sierra Leone is developing standard operating procedures (SOPs) for provision of care to asymptomatic children under five years of age whose primary caregiver is a suspected or confirmed EVD case. The SOPs

would provide a framework for care and monitoring of at-risk children, including guidance on establishment of observational interim care centers (OICCs) at or near ETUs. Non-governmental organization Child Fund will soon open seven OICCs in Sierra Leone, according to the agency. Child Fund recommends that asymptomatic children whose primary caregiver is a suspected EVD case are immediately placed in OICCs—rather than first moving children to holding centers—to reduce the possibility of EVD transmission.

LOGISTICS AND RELIEF COMMODITIES

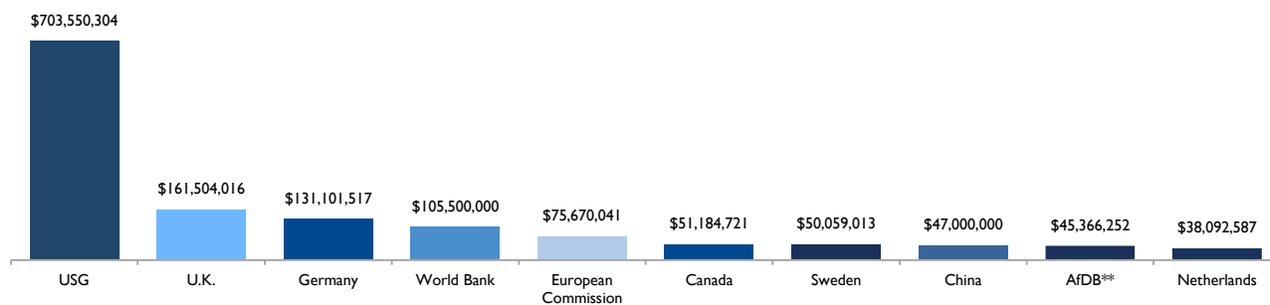
- In November, USAID/OFDA supported WFP with more than \$45 million to improve logistical capacity and relief commodity storage and distribution in Liberia. The funding will support a broad range of EVD response activities, including heavy equipment for offloading of air-cargo, improvement of warehouses and storage hubs, and strengthening of transport supply chains for the distribution of PPE and other commodities critical to the effective functioning of ETUs and CCCs throughout Liberia.
 - Between November 9 and 16, UNMEER airlifted approximately 370 metric tons (MT) of humanitarian supplies, PPE for HCWs, and vehicles to Guinea, Liberia, and Sierra Leone. In recent months, the U.N. and other relief organizations have transported more than 260 U.N. vehicles to the three countries for use by UNMEER and implementing partners. As of November 16, UNMEER and the USAID/OFDA-supported U.N. Humanitarian Air Service (UNHAS) had conducted 540 humanitarian flights, transporting more than 2,300 EVD response personnel and 17 MT of cargo for nearly 60 relief organizations.
 - On November 22, UNHAS helicopters successfully collected and delivered containers of laboratory samples from remote locations in Sierra Leone to the CDC laboratory in Bo District for the first time. Local laboratory teams in Bombali District's Makeni town and Koinadugu District's Kumala town safely packaged samples for transport pursuant to the CDC's Ebola Lab Sample Packaging and Transportation Protocol. CDC plans to continue to monitor and support transport of samples by helicopter until November 29, when it will hand over responsibility to the Sierra Leone Laboratory Team.
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FOOD SECURITY AND LIVELIHOODS

- In mid-November, USAID/FFP contributed nearly \$4.6 million to the WFP for local and regional procurement of cereal, pulses, and vegetable oil for its EVD response operation in Sierra Leone. WFP plans to provide monthly food rations to nearly 603,000 people—including ETU patients, EVD survivors recently discharged from ETUs, and communities with widespread and intense EVD transmission—in priority locations across the country between October 2014 and February 2015.
 - In Liberia, USAID/FFP partner Agricultural Cooperative Development International/Volunteers in Overseas Cooperative Assistance (ACDI/VOCA) reports that the LAUNCH program in Bong and Nimba counties has adjusted some activities in response to the EVD outbreak. As of November 21, most beneficiary farmers continued to work their fields and prepare to harvest crops. Some communities had reported disruptions to farming activities due to EVD-related deaths; however, disruptions were not widespread. Meanwhile, LAUNCH's EVD awareness team continue to work closely with county, district, and community leaders and the MOH to support HCW training and community awareness campaigns and provide medical supplies to health facilities.
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2014 TOTAL FUNDING FOR THE EBOLA RESPONSE*

PER DONOR



* Funding figures are as of November 25, 2014. All international figures are according to the U.N. Office for the Coordination of Humanitarian Affairs (OCHA) Financial Tracking Service and based on international commitments during the 2014 calendar year, while USG figures are according to the USG and reflect USG commitments from FY 2014 and FY 2015, which began on October 1, 2013 and October 1, 2014, respectively.

**African Development Bank (AfDB)

CONTEXT

- EVD is a severe illness transmitted through direct contact with the blood, bodily fluids, and tissues of infected animals or people. There is currently no cure or preventive vaccine for EVD.
- On August 4, U.S. Ambassador Deborah R. Malac declared a disaster due to the effects of the EVD outbreak in Liberia. U.S. Chargé d’Affaires Kathleen FitzGibbon declared a disaster in Sierra Leone on August 13. On August 15, U.S. Chargé d’Affaires Ervin Massinga declared a disaster in Guinea. U.S. Chargé d’Affaires, a.i, Andrew Young declared a disaster in Mali on November 17.
- The USG deployed a field-based DART on August 5 and established a corresponding Response Management Team (RMT) based in Washington, D.C. The DART—comprising disaster response and medical experts from USAID/OFDA and CDC—is working to identify key needs stemming from the EVD outbreak, amplify humanitarian response efforts, and coordinate all USG efforts to support the EVD response.

USG HUMANITARIAN ASSISTANCE TO THE EVD RESPONSE PROVIDED IN FY 2014 & 2015¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
REGIONAL			
African Union (AU)	Health	Guinea, Liberia, Sierra Leone	\$10,000,000
CDC	Health	Guinea, Liberia, Sierra Leone	\$3,000,000
UNICEF	Health	Guinea, Liberia, Sierra Leone	\$600,000
UNHAS	Logistics Support and Relief Commodities	Guinea, Liberia, Sierra Leone	\$250,000
	Program Support		\$5,773,892
LIBERIA			
ARC	Health	Liberia	\$7,633,633
CARE	Health	Liberia	\$1,652,992
CONCERN	Health, Protection	Liberia	\$6,806,343
Catholic Relief Services (CRS)	Health	Liberia	\$960,447
Global Communities (GC)	Health	Liberia	\$17,267,089

Heart to Heart International (HHI)	Health, Protection	Liberia	\$7,001,161
International Federation of Red Cross and Red Crescent Societies (IFRC)	Health	Liberia	\$1,000,000
IMC	Health, Protection	Liberia	\$19,674,298
IOM	Health	Liberia	\$28,048,894
International Rescue Committee (IRC)	Health	Liberia	\$13,371,683
John Snow Inc. (JSI)	Health	Liberia	\$3,164,720
MENTOR Initiative	Health	Liberia	\$1,598,314
Mercy Corps	Health, Humanitarian Coordination and Information Management	Liberia	\$12,000,000
Partners in Health (PIH)	Health, Protection	Liberia	\$11,277,896
Plan USA	Health	Liberia	\$1,508,821
Project Concern International (PCI)	Health, Logistics Support and Relief Commodities	Liberia	\$5,679,113
Samaritan's Purse (SP)	Health, Logistics Support and Relief Commodities	Liberia	\$7,782,027
SC	Health, Protection, WASH	Liberia	\$8,276,263
UNICEF	Health, Logistics Support and Relief Commodities, WASH	Liberia	\$50,767,691
U.N. Office for Project Services (UNOPS)	Logistics Support and Relief Commodities	Liberia	\$6,875,714
Welthungerhilfe (WHH)	Health, WASH	Liberia	\$1,302,322
WFP	Logistics Support and Relief Commodities	Liberia	\$45,008,916
USAID/OFDA-Airlifted Relief Commodities	Logistics Support and Relief Commodities	Liberia	\$5,431,853
SIERRA LEONE			
IFRC	Health	Sierra Leone	\$7,000,000
IMC	Health, Protection	Sierra Leone	\$5,164,183
UNICEF	Health, Protection, WASH	Sierra Leone	\$4,084,214
GUINEA			
CRS	Health	Guinea	\$4,041,621
Internews	Humanitarian Coordination and Information Management	Guinea	\$799,846
IFRC	Health	Guinea	\$1,999,552
Plan International	Health	Guinea	\$1,028,074
Relief International (RI)	Health	Guinea	\$4,000,000
SC	Health	Guinea	\$1,499,203
WFP	Health, WASH	Guinea	\$2,500,000
TOTAL USAID/OFDA ASSISTANCE TO EVD RESPONSE EFFORTS			\$315,830,775

USAID/FFP			
WFP	WFP Regional Emergency Operation	Guinea, Liberia, Sierra Leone	\$34,769,529
TOTAL USAID/FFP ASSISTANCE TO EVD RESPONSE EFFORTS			\$34,769,529
USAID/GH			
Johns Hopkins Center for Communication Programs (JHCCP)	Health	Guinea, Liberia, Sierra Leone; neighboring at-risk countries	\$4,888,500
WHO	Health	Guinea, Liberia, Sierra Leone; neighboring at-risk countries	\$12,787,500
TOTAL USAID/GH ASSISTANCE TO EVD RESPONSE EFFORTS			\$17,676,000
USAID/Liberia			
GoL Ministry of Health and Social Welfare	Health	Liberia	\$5,000,000
TOTAL USAID/Liberia ASSISTANCE TO EVD RESPONSE EFFORTS			\$5,000,000
USAID/Guinea			
	Planned Health Assistance	Guinea	\$3,482,000
TOTAL USAID/Guinea ASSISTANCE TO EVD RESPONSE EFFORTS			\$3,482,000
DoD			
DoD		Liberia	\$283,300,000
TOTAL DoD ASSISTANCE TO EVD RESPONSE EFFORTS			\$283,300,000
CDC			
CDC	Health	West Africa	\$43,492,000
TOTAL CDC ASSISTANCE TO EVD RESPONSE EFFORTS			\$43,492,000
TOTAL USG ASSISTANCE TO EVD RESPONSE EFFORTS IN FY 2014 & 2015			\$703,550,304

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - The Center for International Disaster Information: www.cidi.org or +1.202.821.1999.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.

USAID/OFDA bulletins appear on the USAID website at <http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>